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ATTORNEY DOCKET NO. 4459-0149P

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

	(if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
Insert Title:	MULTI-CHIP INTEGRATE	D MODULE						
	the specification of which is attached here	eto. If not attached hereto,						
Fill in Appropriate	the specification was filed on			as				
Information - For Use Without Specification Attached:	United States Application Nun	iber		:				
	and amended on		(if	applicable); and/or				
	the specification was filed on		as PCT					
	International Application Number		; and was					
	amended on			(if applicable)				
	I hereby state that I have reviewed as by any amendment referred to above. I acknowledge the duty to disclose it \$1.56. I do not know and do not believe to thereof, or patented or described in any prior to this application, that the same we application in any country foreign to the more than twelve months (six months foon this invention has been filed in any representatives or assigns, except as followed in the property of t	nformation which is material to the same was ever known or un printed publication in any count as not in public use or on sale been patented or made the suf- United States of America on a or designs) prior to this applica- country foreign to the United dows.	patentability as defined in Title 3 sed in the United States of Americantry before my or our invention in the United States of America respect of an inventor's certificate an application filed by me or my lation, and that no application for States of America prior to this states Code, §119 (a)-(d) of any foreign application for patent	7, Code of Federal Regulations, ica before my or our invention thereof or more than one year more than one year prior to this issued before the date of this egal representatives or assigns patent or inventor's certificate application by me or my legal verign application(s) for patent				
Insert Priority Information:	Prior Foreign Application(s)			Priority Claimed				
	091119466	Taiwan, R.O.C.	August 27, 2002					
(if appropriate)	(Number)	(Country)	(Month / Day / Year Filed)	Yes No				
	02132260.0	P. R. China	September 4, 2002					
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No				
		(0	(Month / Day / Year Filed)	- 🖸 🖸				
	(Number)	(Country)	(Month / Day / Tear Filed)	Yes No				
	(Number)	(Country)	(Month / Day / Year Filed)	- 🗍 🗍 Yes No				
For Use Without Specification Attached: Insert Priority Information:	I hereby claim the benefit under Title 35,	United States Code, §119(e) of	any United States provisional app	lication(s) listed below.				
	(Application Number)			(Filing Date)				
	(Application Number)			(Filing Date)				
	All Foreign Applications, if any, for any the Filing Date of this Application:	Patent or Inventor's Certification	ate Filed more than 12 months (6 months for designs) Prior to				
Information:	Country Application Number		lication Number D	Date of Filing (Month / Day / Year)				
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Pederal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:							
	(Application Number)	(Filing Date)	(Status - pater	nted, pending, abandoned)				
	(Amiliantian Number)	(Filing Date)	(Status - nate	nted nending abandoned)				

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I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

PLEASE NOTE:

BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTORMER NO. 2292 P.O. Box 747 · Falls Church, Virginia 22010-0747

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

COMPLETE THE								
FOLLOWING:								
Full Name of First or Sole inventor:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	_		
Insert Name of Inventor Insert Date This Document is Signed	YUAN-JEN	CHAO	Zywan-Jen	Chao	2003.07.11			
Insert Residence Insert Citizenship	Residence (City, State Kaohsiung, Taiv	•	0	CITIZENSHIP Taiwan, R				
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
Insert Mailing Address	9Fl., No. 31, Lane 497, Tsueihua Rd., Gushan Chiu, Kaohsiung, Taiwan 804, R.O.C.							
Full Name of Second Inventor, if any:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
see ahove	Residence (City, State & Country)			CITIZENSHIP	CITIZENSHIP			
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
Pull Name of Third Inventor, if any see above	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
	Residence (City, State & Country)			CITIZENSHIP				
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
Full Name of Fourth Inventor, if any see above	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
	Residence (City, State & Country)			CITIZENSHIP	CITIZENSHIP			
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
Full Name of Fifth Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
see above	Residence (City, State & Country) CITIZENSHIP							
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
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•	. DATE OF CICALATURE					-		